



State of New Hampshire 2007 ANNUAL REPORT

The following information shall be given as of January 1
preceeding the due date Pursuant to RSA 293-A:16.22.

REPORT DUE BY April 1, 2007

ANNUAL REPORTS RECEIVED AFTER THE DUE DATE
WILL BE ASSESSED A LATE FEE.

Filed

Date Filed: 04/05/2007

Business ID: 81010

William M. Gardner

Secretary of State

RABO AGRIFINANCE, INC.

ONE CITYPLACE DRIVE, SUITE 200
ST. LOUIS, MO 63141

ADDRESS OF PRINCIPAL OFFICE:

ONE CITYPLACE DRIVE, SUITE 200
ST. LOUIS, MO 63141

REGISTERED AGENT AND OFFICE:

C T CORPORATION SYSTEM
9 CAPITOL STREET
CONCORD, NH 03301

ENTITY TYPE: CORPORATION

BUSINESS ID: 81010

STATE OF DOMICILE: DELAWARE

FEDERAL ID: 581571529

ADVISORY SERVICES & AGRICULTURAL INVESTMENT (REAL
ESTATE 1999 AR)

If changing the mailing or principal office address, please check the appropriate box and fill in the necessary information.

☐

The new mailing address

☐

The new principal office address

PO Box is acceptable.

OFFICERS

NAME AND BUSINESS ADDRESS (P.O. BOX ACCEPTABLE).

(MUST LIST AT LEAST ONE OFFICER BELOW)

ASSI. David Dietz

STREET 245 Park Avenue

CITY/STATE/ZIP New York Ny 10167

PRES. Richard E. Henderson, Jr.

STREET One Cityplace Drive, Ste 200

CITY/STATE/ZIP St. Louis Mo 63141

TREAS. Mark D. Grass

STREET One Cityplace Drive, Ste 200

CITY/STATE/ZIP St. Louis Mo 63141

V-PRES. Eric R. Linge

STREET One Cityplace Drive, Ste 200

CITY/STATE/ZIP St. Louis Mo 63141

NAMES AND ADDRESSES OF ADDITIONAL OFFICERS AND DIRECTORS ARE ATTACHED

BOARD OF DIRECTORS

NAME AND BUSINESS ADDRESS (P.O. BOX ACCEPTABLE).

(MUST LIST AT LEAST ONE DIRECTOR BELOW)

DIR. Richard E. Henderson, Jr.

STREET One Cityplace Drive, Ste 200

CITY/STATE/ZIP St. Louis Mo 63141

DIR. Cor Broekhuysen

STREET 245 Park Ave

CITY/STATE/ZIP New York Ny 10167

DIR. Guillermo Bilbao

STREET 245 Park Ave

CITY/STATE/ZIP New York Ny 10167

DIR. Robert Bucklin

STREET 245 Park Ave

CITY/STATE/ZIP New York Ny 10167

To be signed by an officer, director, or any other person authorized by the board of directors.
I, the undersigned do hereby Certify that the statements on this report are true to the best of my information, knowledge and belief.

Sign here:

Donald Garner

Please print name and title of signer:

Donald Garner

/ AUTHORIZED PARTY

NAME

TITLE

FEE DUE: \$150.00

E-MAIL ADDRESS (OPTIONAL):



WHEN THIS FORM IS ACCEPTED BY THE SECRETARY OF STATE, BY LAW IT WILL BECOME A
PUBLIC DOCUMENT AND ALL INFORMATION PROVIDED IS SUBJECT TO PUBLIC DISCLOSURE

REQUIRED INFORMATION MUST BE COMPLETE OR THE REGISTRATION REPORT WILL BE REJECTED

MAKE CHECK PAYABLE TO SECRETARY OF STATE

RETURN COMPLETED REPORT AND PAYMENT TO:

New Hampshire Department of State, Annual Reports, P.O. Box 9529, Manchester, NH 03108-9529

2007 ANNUAL REPORT

NAMES AND ADDRESSES OF ALL OTHER OFFICERS AND DIRECTORS:

OTHER

GUILLERMO BILBAO

245 PARK AVE

NEW YORK, NY 10167